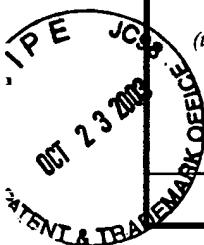


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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)



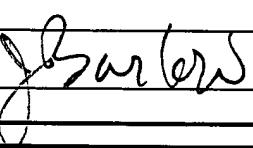
Application Number	09/961,151
Filing Date	9/24/2001
First Named Inventor	KONDO
Group Art Unit	1754
Examiner Name	Wright
Attorney Docket Number	12-009

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OCT 28 2003  
TC 1700

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawings: 2 substitute sheets  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> Request of Refund  Remarks	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Additional Enclosure(s) (please identify below):  <div style="border: 1px solid black; height: 40px; margin-top: 10px;"></div> <div style="border: 1px solid black; height: 40px; margin-top: 10px;"></div> <div style="border: 1px solid black; height: 40px; margin-top: 10px;"></div>
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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Posz & Bethards, PLC
Signature	
Date	23 October 2003

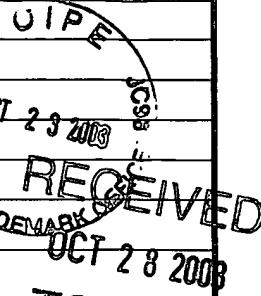
## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to : Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22323-14501.

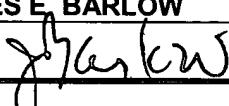
Type or printed name		
Signature		Date:

# FEE TRANSMITTAL for FY 2004

		<i>Complete if Known</i>	
		Application Number	09/961,151
		Filing Date	9/24/2001
		First Named Inventor	KONDO
		Examiner Name	Wright
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Group/Art Unit	1754
<b>TOTAL AMOUNT OF PAYMENT</b> (\$ 1,130)		Attorney Docket No.	12-009

  
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METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																																																																																																									
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account <b>50-1147</b> <b>POSZ &amp; BETHARDS, PLC</b>				<b>3. ADDITIONAL FEES</b> <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th colspan="2">Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Fee Code</td> <td>Fee (\$)</td> <td>Fee Code</td> <td>Fee (\$)</td> <td></td> </tr> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge – late filing fee or oath</td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge – late provisional filing fee or cover sheet</td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td>Non-English specification</td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For filing a request for <i>ex parte</i> reexamination</td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> </tr> <tr> <td>1805</td> <td>1,840*</td> <td>1805</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> </tr> 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SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	JAMES E. BARLOW		Registration No. (Attorney/Agent)	32,377
Signature			Telephone	(703) 707-9110
			Date	23 October 2003